



FREDERICK

MARYLAND

Engineering Department
140 West Patrick Street
Frederick, MD 21701
301-600-1498

Date Submitted _____

City PZ Case # _____
(For City Use Only)

CAPITAL PROJECT IMPROVEMENT PLAN SUBMITTAL

NOTE: EMAIL PDF OF COMPLETE SUBMITTAL PACKAGE TO engineeringreview@cityoffrederickmd.gov

☐ City Project ☐ County FCPS Project ☐ State Project ☐ Project Number _____

Owner/Project Manager Contact: _____ Email: _____

PLAN REVIEW SUBMISSION

☐ First Review Submission ☐ Revisions to Previously Approved Plans ☐ Reapproval of Expired Plans

Submittal Information:

- ☐ Engineering Review Minimum Criteria Checklist (First Review Submission Only)
☐ Signed and Sealed SWM Computations and Drainage Area Maps
☐ Project Estimate (Construction estimate - City Project Only)

PLAN INFORMATION

PLAN TITLE _____

ADDRESS _____

SHEET NUMBERS _____

ENGINEER/CONSULTANT INFORMATION

ENGINEER _____ COMPANY _____

FULL ADDRESS _____

EMAIL _____ PHONE _____